

88/581301

1AP20 Rec'd PCT/PTO 01 JUN 2006

Application Data Sheet

**Application Information**

Application Type::	National Stage
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of Copies of CDs::	
Sequence Submission?::	None
Computer Readable Form (CRF)::	No
Number of copies of CRF::	0
Title::	SYSTEM AND METHOD FOR PROCESSING A REQUEST FOR PRICE INFORMATION
Attorney Docket Number::	0518-1011-1
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	15
Small Entity?::	No
Latin Name::	
Variety Denomination Name::	
Petition Included?::	No
Petition Type::	
Licensed US Gov't Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: FRANCE  
Status:: Full Capacity  
Given Name:: BÉNÉDICTE  
Middle Name::  
Family Name:: ISNARDON  
Name Suffix::  
City of Residence:: NICE  
State or Province of Residence::  
Country of Residence:: FRANCE  
Street of Mailing C/O OFFICE MEDITERRANEEN DE BREVETS  
Address:: D'INVENTION ET DE MARQUES  
CABINET HAUTIER  
24 RUE MASSENA  
City of Mailing Address:: NICE  
State or Province of Mailing Address::  
Country of Mailing Address:: FRANCE  
Postal or Zip Code of Mailing Address:: F-06000

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: FRANCE  
Status:: Full Capacity  
Given Name:: THIERRY  
Middle Name::  
Family Name:: BLASZKA  
Name Suffix::  
City of Residence:: NICE  
State or Province of Residence::  
Country of Residence:: FRANCE  
Street of Mailing C/O OFFICE MEDITERRANEEN DE BREVETS  
Address:: D'INVENTION ET DE MARQUES  
CABINET HAUTIER

24 RUE MASSENA

City of Mailing Address:: NICE  
State or Province of Mailing Address::  
Country of Mailing Address:: FRANCE  
Postal or Zip Code of Mailing Address:: F-06000

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: FRANCE  
Status:: Full Capacity  
Given Name:: FRÉDÉRIC  
Middle Name::  
Family Name:: HOFF  
Name Suffix::  
City of Residence:: NICE  
State or Province of Residence::  
Country of Residence:: FRANCE  
Street of Mailing Address:: C/O OFFICE MEDITERRANEEN DE BREVETS  
D'INVENTION ET DE MARQUES  
CABINET HAUTIER  
24 RUE MASSENA

City of Mailing Address:: NICE  
State or Province of Mailing Address::  
Country of Mailing Address:: FRANCE  
Postal or Zip Code of Mailing Address:: F-06000

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: FRANCE  
Status:: Full Capacity  
Given Name:: NATALIA  
Middle Name::  
Family Name:: PEREKHVATOVA  
Name Suffix::  
City of Residence:: NICE  
State or Province of Residence::

Country of Residence:: FRANCE  
Street of Mailing C/O OFFICE MEDITERRANEEN DE BREVETS  
Address:: D'INVENTION ET DE MARQUES  
CABINET HAUTIER  
24 RUE MASSENA  
City of Mailing Address:: NICE  
State or Province of Mailing Address::  
Country of Mailing Address:: FRANCE  
Postal or Zip Code of Mailing Address:: F-06000

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: FRANCE  
Status:: Full Capacity  
Given Name:: RUDY  
Middle Name::  
Family Name:: DANIELLO  
Name Suffix::  
City of Residence:: NICE  
State or Province of Residence::  
Country of Residence:: FRANCE  
Street of Mailing C/O OFFICE MEDITERRANEEN DE BREVETS  
Address:: D'INVENTION ET DE MARQUES  
CABINET HAUTIER  
24 RUE MASSENA  
City of Mailing Address:: NICE  
State or Province of Mailing Address::  
Country of Mailing Address:: FRANCE  
Postal or Zip Code of Mailing Address:: F-06000

**Correspondence Information**

Correspondence Customer Number:: 00466

**Representative Information**

Representative Customer Number::	00466
----------------------------------	-------

---

**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Stage of	PCT/EP2004/053162	11/29/04
PCT/EP2004/053162	An appln. Claiming the benefit under 35 USC 119(e)	60/530,673	12/19/03

**Foreign Priority Information**

Country::	Application Number::	Filing Date::	Priority Claimed::
EUROPE	03293019.0	12/2/03	Yes

**Assignment Information**

Assignee Name:: AMADEUS S.A.S.  
Street of Mailing 485 ROUTE DU PIN MONTARD,  
Address:: SOPHIA ANTIPOLIS  
City of Mailing Address:: BIOT  
State or Province of Mailing Address::  
Country of Mailing Address:: FRANCE  
Postal or Zip Code of Mailing Address:: 06410